

SECTION A-A

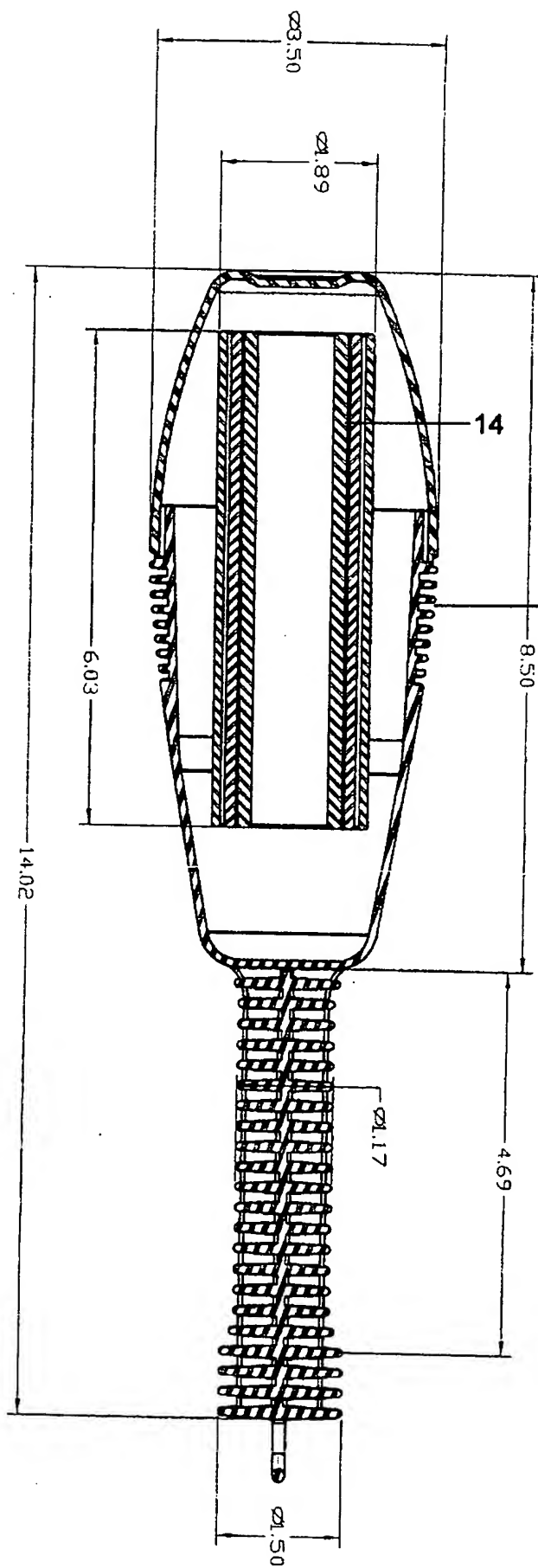


Fig. 1

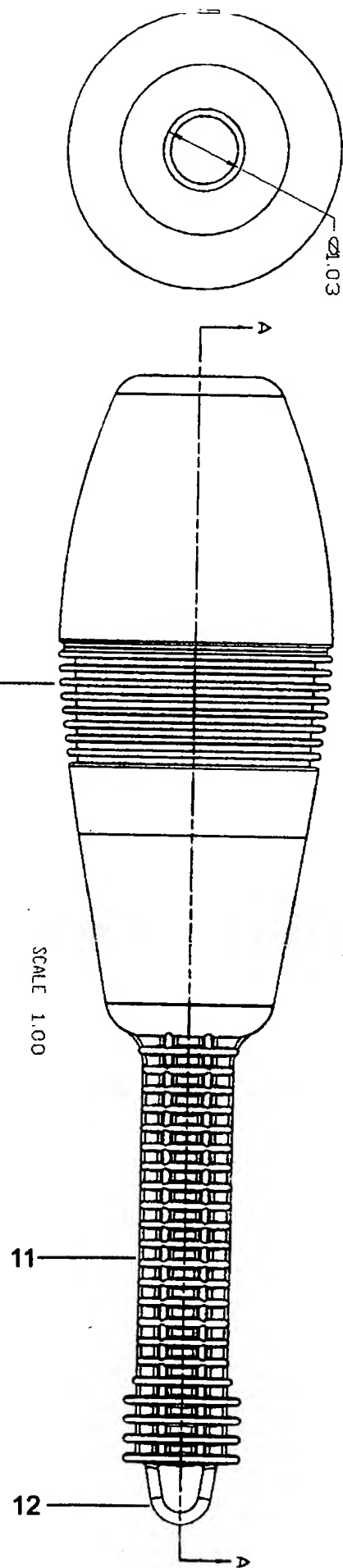


Fig. 2



NAME	JOHN J. BROWN	DOB	01/01/1945	SSN	123-45-6789	EXP	01/01/2025	STATUS	ACTIVE
ADDRESS	1234 MAIN ST, APT 5B, NEW YORK, NY 10001								
PHONE	212-555-1234								
EMAIL	john.brown@example.com								
EMPLOYEE ID	EMP001								
DEPARTMENT	SALES								
POSITION	SALES REPRESENTATIVE								
MANAGER	JOHN DOE								
DATE OF BIRTH	01/01/1945								
DATE OF EMPLOYMENT	01/01/2020								
DATE OF LAST UPDATE	01/01/2024								
DATE OF NEXT REVIEW	01/01/2025								
DATE OF LAST PAYROLL	01/01/2024								
DATE OF LAST BENEFIT	01/01/2024								
DATE OF LAST TAX	01/01/2024								
DATE OF LAST INSURANCE	01/01/2024								
DATE OF LAST MEDICAL	01/01/2024								
DATE OF LAST VACCINATION	01/01/2024								
DATE OF LAST PHYSICAL	01/01/2024								
DATE OF LAST DENTAL	01/01/2024								
DATE OF LAST OPTOMETRIC	01/01/2024								
DATE OF LAST HEARING	01/01/2024								
DATE OF LAST EYE EXAM	01/01/2024								
DATE OF LAST SKIN EXAM	01/01/2024								
DATE OF LAST ALLERGY TEST	01/01/2024								
DATE OF LAST BLOOD TEST	01/01/2024								
DATE OF LAST URINE TEST	01/01/2024								
DATE OF LAST X-RAY	01/01/2024								
DATE OF LAST MRI	01/01/2024								
DATE OF LAST CT SCAN	01/01/2024								
DATE OF LAST PET SCAN	01/01/2024								
DATE OF LAST ULTRASOUND	01/01/2024								
DATE OF LAST ENDOSCOPY	01/01/2024								
DATE OF LAST COLONOSCOPY	01/01/2024								
DATE OF LAST PAP SMear	01/01/2024								
DATE OF LAST PSA TEST	01/01/2024								
DATE OF LAST BREAST X-RAY	01/01/2024								
DATE OF LAST MAMMOGRAM	01/01/2024								
DATE OF LAST ULTRASOUND	01/01/2024								
DATE OF LAST ECG	01/01/2024								
DATE OF LAST ECHO	01/01/2024								
DATE OF LAST STRESS TEST	01/01/2024								
DATE OF LAST CAT SCAN	01/01/2024								
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